								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								16765479					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		THAN ENTITY	
TOTAL CLAIMS			10			•		RATE	FEE	7	RATE	FEE	
FOR ·			NUMBER FILED		NUMBER EXTRA			BASIC FI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		•			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 = "			6	ı	X43=	·	OR	X86=		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT				Ī	+145=		OR	+290=		
* 11	the difference	e in column 1 is	ess than zero, enter "0" in column 2				L	TOTAL		OR	TOTAL	700	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
_7	7-6-07 (Column 1) . (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER FUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 12	Minus	- 2	0.	= 0	Ī	·X\$ 9=		OR	X\$18=	. 0	
AME	Independent	* 2	Minus	*** (		= 0	Ī	X43=		OR	X86=	0	
<u> </u>	FINST PRESE	NTATION OF MI	JETIPLE DE	PENUENI	CLAIM		ſ	+145=		OR	+290=	0	
			•				L	TOTAL			TOTAL ADDIT, FEE	0	
(Column 1) (Column 2) (Column 3)										•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	** .		= ,	ı	X\$ 9=		OR	X\$18=		
AME	Independent	* NTATION OF MU	Minus	***	CLAIM	=		X43=		OR	X86=		
	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		CHI CE DE	LITOLITY				+145=		OR	+290=		
				•		·	A.	TOTAL		OR	TOTAL ODIT. FEE		
(Column 1) (Column 2) (Column 3)									, .	• '	WDII. FEEL	-	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOU PAID F	ȘT ER JSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
٥	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
WE [	Independent	*	Minus	***		=	⊩	X43=	<del></del>				
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A43=	-	OR	X86=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  TOTAL ADDIT													
		-		•	•			. •				1	